Colorado
Core Program Performance Indicators from the Data Quality Indicator Guide (DQIG)
April 2012 MDE Submission, Results from July 2010 - June 2011

Refer to the DQIG Report for additional information on these and other indicators

CORE PROGRAM PERFORMANCE INDICATORS			CDC Standard	Colorado Results Percentage	Standard Met ? *	All Programs Combined Results Percentage	Standard Met ? *
Indicator Type	DQIG Item	Program Performance Indicator					
Screening	6.a.	Initial Program Pap Tests; Rarely or Never Screened	≥ 20%	33.8% (1,742/5,152)	YES	30.6% (48,094/157,106)	YES
	19.e.	Mammograms Provided to Women ≥ 50 Years of Age	≥ 75%	80.2% (8,532/10,633)	YES	86.8% (294,864/339,659)	YES
Cervical Cancer Diagnostic Indicators	11.a.	Abnormal Screening Results with Complete Follow-Up	≥ 90%	94.2% (65/69)	YES	92.6% (5,043/5,444)	YES
	16.d.	Abnormal Screening Results; Time from Screening to Diagnosis > 90 Days	≤ 25%	12.9% (8/62)	YES	11.4% (480/4,228)	YES
	17.	Treatment Started for Diagnosis of HSIL, CIN2, CIN3, CIS, Invasive	≥ 90%	93.7% (59/63)	YES	92.1% (3,846/4,177)	YES
	18.d.	HSIL, CIN2, CIN3, CIS; Time from Diagnosis to Treatment > 90 Days	≤ 20%	7.5% (4/53)	YES	8.0% (288/3,580)	YES
	18.g.	Invasive Carcinoma; Time from Diagnosis to Treatment > 60 Days	≤ 20%	16.7% (1/6)	YES	11.2% (29/258)	YES
Breast Cancer Diagnostic Indicators	20.a.	Abnormal Screening Results with Complete Follow-Up	≥ 90%	95.2% (3,272/3,438)	YES	95.3% (102,923/107,987)	YES
	25.d.	Abnormal Screening Results; Time from Screening to Diagnosis > 60 Days	≤ 25%	4.3% (139/3,270)	YES	7.3% (7,480/102,550)	YES
	26.	Treatment Started for Breast Cancer	≥ 90%	98.9% (172/174)	YES	97.5% (5,298/5,436)	YES
	27.d.	Breast Cancer; Time from Diagnosis to Treatment > 60 Days	≤ 20%	7.6% (13/172)	YES	7.3% (384/5,287)	YES

For percentages with a denominator ≥ 10, a one-sided hypothesis test was used in determining if a program failed to meet a DQIG standard.

"Small #": The denominator is less than 10. The one-sided hypothesis test was not conducted.